



**FORM
D-2**

REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES
CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK

- ☐ Quarterly Report:
(Check one: ☐ 1st ☐ 2nd ☒ 3rd ☐ 4th)
- ☐ Final Report (Fund balance on Line E must be \$0)
- ☐ Amendment of the Report Indicated Above

RECEIVED
FOR OFFICE USE ONLY

OCT 14 2021

State Board of Elections
Springfield Office

Full name and complete mailing address of Political Committee:

☐ CHECK FOR ADDRESS CHANGE

People for Carlos
580 Prairie Ridge Drive
Woodstock, IL 60098-6301

COMMITTEE ID #

Committee ID: 34706
14

E-mail address:

☐ CHECK FOR E-MAIL ADDRESS CHANGE

REPORTING PERIOD

7/1/21 9/30/21
FROM THRU

CASH AVAILABLE AT BEGINNING
OF REPORTING PERIOD:

\$ 33.92

Repeat this amount in SECTION D, Line (A)

ALL POLITICAL COMMITTEES RETURN TO:

STATE BOARD OF ELECTIONS
2329 S MacARTHUR BLVD
SPRINGFIELD, IL 62704-4503

OR

STATE BOARD OF ELECTIONS
69 W WASHINGTON ST, STE LL-08
CHICAGO, IL 60602-3026

SECTION A — RECEIPTS

1. Individual Contributions

- a. Itemized (from Schedule A): \$ 0 (1a)
b. Not-Itemized: \$ _____ (1b)

2. Transfers In

- a. Itemized (from Schedule A): \$ _____ (2a)
b. Not-Itemized: \$ _____ (2b)

3. Loans Received

- a. Itemized (from Schedule A): \$ 50.00 (3a)
b. Not-Itemized: \$ _____ (3b)

4. Other Receipts

- a. Itemized (from Schedule A): \$ _____ (4a)
b. Not-Itemized: \$ _____ (4b)

TOTAL RECEIPTS (1a thru 4b) \$ 50.00 (TR)

SECTION B — EXPENDITURES

6. Transfers Out

- a. Itemized (from Schedule B): \$ _____ (6a)
b. Not-Itemized: \$ _____ (6b)

7. Loans Made

- a. Itemized (from Schedule B): \$ _____ (7a)
b. Not-Itemized: \$ _____ (7b)

8. Expenditures

- a. Itemized (from Schedule B): \$ _____ (8a)
b. Not-Itemized: \$ 25.00 (8b)

9. Independent Expenditures

- a. Itemized (from Schedule B-9): \$ _____ (9a)
b. Not-Itemized: \$ _____ (9b)

TOTAL EXPENDITURES (6a thru 9b) \$ _____ (TE)

5. In-Kind Contributions

- a. Itemized (from Schedule I): \$ _____ (5a)
b. Not-Itemized: \$ _____ (5b)

TOTAL IN-KIND (5a + 5b) \$ _____ (TI)

Name and address of person submitting this report if other
than the committee's Chair or Treasurer:

SECTION C — DEBTS AND OBLIGATIONS

(Include previously reported unpaid debts)

10. a. Itemized (from Schedule C): \$ 1,500.00 (10a)
b. Not-Itemized: \$ _____ (10b)

TOTAL DEBTS & OBLIGATIONS \$ 1,500.00

SECTION D — CASH BALANCE

Cash available at beginning of
reporting period: \$ 33.92 (A)

Total Receipts from Section A (TR): \$ 50.00 (B)

Total cash (A) plus (B): \$ 83.92 (C)

Total Expenditures from Section B (TE): \$ 25.00 (D)

Funds available at close of
reporting period (C minus D): \$ 58.92 (E)

Investments total (if applicable): \$ _____ (F)

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE

DATE

NAME OF POLITICAL COMMITTEE:

REPORTING PERIOD

FOR OFFICE USE ONLY

7/1/21 | 9/30/21
FROM THRU

SCHEDULE A RECEIPTS

CHECK THE PART OF FORM D-2, SECTION A, BEING ITEMIZED:

- ☐ PART #1- INDIVIDUAL CONTRIBUTIONS
INCLUDING TICKETS AND RAFFLE SALES
- ☒ PART #3- LOANS RECEIVED
INCLUDING ENDORSER
- ☐ PART #2- TRANSFERS IN
POLITICAL COMMITTEE CONTRIBUTIONS
INCLUDING TICKET AND RAFFLE SALES
- ☐ PART #4- OTHER RECEIPTS

POLITICAL COMMITTEE
IDENTIFICATION

No. 3470614

SEE PAMPHLET "A GUIDE TO CAMPAIGN DISCLOSURE" FOR GUIDANCE.

ITEMIZED RECEIPTS FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE RECEIVED	AMOUNT OF EACH RECEIPT	AGGREGATE AMOUNT FOR THIS REPORTING PERIOD
CARLOS J. ACOSTA 580 PRAIRIE RIDGE DR. WOODSTOCK, IL 60098	9/30/21	\$ 50.00 EMPLOYER: BLAIR COUNSELING	\$ 50.00 OCCUPATION: THERAPIST
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:
		\$ EMPLOYER:	\$ OCCUPATION:

USE A SEPARATE SCHEDULE A FOR EACH PARTS 1, 2, 3, & 4

TOTAL THIS PERIOD \$ 50.00